## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 or <u>Fax</u>

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5.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  Griffin & Szipl, P.C.  Suite PH-1  2300 Ninth Street South  Arlington, Virginia 22204				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED IN		ITOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/595,130 TITLE OF INVENTION:	02/16/2007	Je	ean-Claude Vuill	eumier	ICB0235	3243
APPLN, TYPE	SMALL ENTITY	ISSUE F	EE PI	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$144		\$300	\$1740	05/05/2008
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EXAMINER		ART UN	IIT C	LASS-SUBCLASS		
Change of correspond Address form PTO/SB/12   "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.   3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  HE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.					
(A) NAME OF ASSIGNI				_		
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  The Swatch Group Management Services AG Biel, Switzerland						
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the patent) :		Corporation or other private gro	oup entity Government
4a. The following fee(s) are	enclosed:	4b	Payment of Fee(s):			
✓ Issue Fee ✓ Publication Fee (No. 8)	mall entity discount permitte	d)	_	nount of the fee(s) is a t card. Form PTO-20		
Advance Order - # of		u)			charge the required fee(s), or 81 (enclose an extra co	credit any overpayment, to opy of this form).
5. Change in Entity Status	•					
	MALL ENTITY status. See				ALL ENTITY status. See 37 CI	
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	s requested to apply the Issuablication Fee (if required) wards of the United States Pate	e Fee and Publicat rill not be accepted nt and Trademark	tion Fee (if any) or to I from anyone other th Office.	re-apply any previous an the applicant; a re	sly paid issue fee to the applicat gistered attorney or agent; or th	tion identified above.  ne assignee or other party in
Authorized Signature	7	<b>√</b>		Date Apr	il 30, 2008	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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